|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| CoSer # | | Date of Event: | | | | |
| Lead Facilitator: | | Time/Hours: | | | | |
| Co-Facilitator(s): | | Event: | | | | |
| Location: | | | | |
| **Participant Attendance** | | | | | | |
| **Name**  (Please Print) | **Title**  (Admin/Teacher) | **District and Building** | **Grade**  **Level** | **If BOCES**  **Employee, Division** | **Time In** | **Time Out** |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |
| 8. |  |  |  |  |  |  |
| 9. |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |
| 11. |  |  |  |  |  |  |
| 12. |  |  |  |  |  |  |
| 13. |  |  |  |  |  |  |
| 14. |  |  |  |  |  |  |
| 15. |  |  |  |  |  |  |